

IN UNITED STATES		MAGISTRATE	DISTRICT	<input type="checkbox"/> APPEALS COURT or	<input type="checkbox"/> OTHER PANEL (Specify below)	LOCATION NUMBER [Redacted]
IN THE CASE						FOR [Redacted]
USA V.S. <u>MOTT</u>						AT [Redacted]
PERSON REPRESENTED (Show your full name) <u>LORRAINE MOTT</u>						DOCKET NUMBERS
						Magistrate
						District Court
						Court of Appeals
CHARGE/OFFENSE (describe if applicable & check <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor)						1 <input checked="" type="checkbox"/> Defendant--Adult 2 <input type="checkbox"/> Defendant - Juvenile 3 <input type="checkbox"/> Appellant 4 <input type="checkbox"/> Probation Violator 5 <input type="checkbox"/> Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input type="checkbox"/> 2255 Petitioner 8 <input type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other
EMPLOY- MENT	Are you now <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed					
	Name and address of employer:					
	IF YES, how much do you earn per month? \$					IF NO, give month and year of last employment How much did you earn per month? \$
	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	IF YES, how much does your Spouse earn per month? \$					If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$
ASSETS	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					RECEIVED SOURCES
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES \$					
	CASH Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$					
	PROP- ERTY Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, GIVE THE VALUE AND \$ DESCRIBE IT					VALUE DESCRIPTION
OBLIGATIONS & DEBTS	MARITAL STATUS		Total No. of Dependents	List persons you actually support and your relationship to them		
	SINGLE MARRIED WIDOWED SEPARATED DIVORCED					
	DEPENDENTS					
	APARTMENT OR HOME:		Creditors	Total Debt	Monthly Paymt.	
	<u>176 per mon</u>		<u>Lorandy</u>	\$ <u>00</u>	\$ <u>00</u>	
<u>gas</u>			\$ <u>00</u>	\$ <u>00</u>		
<u>electric</u>			\$ <u>00</u>	\$ <u>00</u>		
<u>phone</u>			\$ <u>00</u>	\$ <u>00</u>		
I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) <u>7-20-04</u>						
SIGNATURE OF DEFENDANT (OR PERSON REPRESENTED) <u>X Ms. Lorraine Mott</u>						

IN UNITED STATES		MAGISTRATE	DISTRICT	<input type="checkbox"/> APPEALS COURT or	<input type="checkbox"/> OTHER PANEL (Specify below)	LOCATION NUMBER	
IN THE CASE		FOR					
USA		AT					
PERSON REPRESENTED (Show your full name)						DOCKET NUMBERS	
<i>Sunay Mohamed</i>						Magistrate	
CHARGE/OFFENSE (describe if applicable & check						Docket Numbers	
<input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor						Magistrate District Court Court of Appeals	
Are you now <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Am Self-Employed Name and address of employer: <i>Criminal Taxi, PO Box 60, Roslindale</i>						02131	
EMPLOYMENT IF YES, how much do you earn per month? \$ <i>3000 - 3500</i>						IF NO, give month and year of last employment How much did you earn per month? \$ _____	
If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ _____						If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____	
ASSETS OTHER INCOME IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES \$ _____						RECEIVED SOURCES <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
CASH Have you any cash on hand or money in savings or checking accounts? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ <i>1500.00</i>							
PROPERTY Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, GIVE THE VALUE AND \$ <i>30,000</i> DESCRIBE IT <i>Criminal Taxi</i> — <i>140,000</i> <i>Bob's Taxi</i> — <i>26,000</i>						VALUE DESCRIPTION <i>garage, 450-452 2nd St. Ball River, my share with \$10,000 Bob's Taxi inc all car, hard capped my share of this mediation is 1/2</i>	
OBLIGATIONS & DEBTS <small>This is in litigation between us where I claim all debts due me</small>						MARITAL STATUS <small>DEPENDENTS</small> SINGLE MARRIED WIDOWED SEPARATED OR DIVORCED	Total No. of Dependents List persons you actually support and your relationship to them <i>Criminal Mohamed (son)</i>
DEBTS & MONTHLY BILLS <small>(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)</small>						APARTMENT OR HOME: <i>8th & St. (rent + utilities)</i> <i>Criminal Taxi mediation</i> <i>Criminal Taxi</i>	Total Debt Monthly Paymt. <i>\$ 0</i> <i>\$ 550.00</i> <i>\$ 150.00</i> <i>\$ 0</i> <i>\$ 0</i>
I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)						<i>7/20/2004</i>	
SIGNATURE OF DEFENDANT (OR PERSON REPRESENTED)						<i>Sunay Mohamed</i>	